

DEC 04 2024

NO. CV24-09-734

LOUCRECIA BIGGERSTAFF
DISTRICT CLERK-WISE COUNTY, TX
BY CS DEPUTY

IN THE MATTER OF
THE MARRIAGE OF

CHRISTOPHER MCCARTHY
and
DARCY GUSSE

§
§
§
§
§
§

IN COUNTY COURT AT LAW

NUMBER TWO

WISE COUNTY, TEXAS

**RESPONDENT'S MOTION FOR DISMISSAL FOR LACK OF STANDING WITH PREJUDICE
OF PETITION FOR INFORMAL DIVORCE CLAIM**

TO THE HONORABLE COURT:

NOW COMES, DARCY GUSSE, the Respondent, by and through Pro Se, hereby moves this Court for a Motion for Dismissal for lack of standing with prejudice on the above matter filed by CHRISTOPHER MCCARTHY, the Petitioner. The grounds are set forth below:

1. *Denial*

Respondent enters a general denial.

2. *Verified Defenses*

A. The Respondent to the Original Petition is requesting the Court to consider a Motion to Dismiss this Petition claiming a marriage existed between Petitioner and Respondent "on or about 2017 and ceased to live together as spouses on or about 31 March 2024". Due to the fact there is a clear and present contradiction in the Petitioner's Petition, filing CV24-09-734 filed with County Court Law Number Two in Wise County on September 11, 2024, and Petitioner's Case No. 20-40555 the Eastern District of Texas Bankruptcy Court in February of 2020. EXHIBIT 1

B. Petitioner filed Federal Bankruptcy Chapter 7 with the Eastern District of Texas on March 3, 2020, Case No. 20-40555, with the bankruptcy being discharged in February of 2021. At the time Petitioner filed bankruptcy he and Respondent were apart and not living together. Due to Title 18 U.S. Code § 157 a federal law that prohibits bankruptcy fraud. Petitioner stated as fact and under oath in

his Chapter 7 filed with the Eastern District of Texas on March 3, 2020, that his marital status was “Not Married” and marital status and check “No” to the question “had he within the last 8 years ever live with a spouse or legal equivalent in a community property state (Texas)”. **EXHIBIT 2**

C. Petitioner enters the following defense: Petitioner is not entitled to recover in the capacity in which Petitioner sues, and Respondent is not liable in the capacity in which Respondent being sued, because there is no existing marriage, nor did an informal marriage ever exist between the parties. Petitioner falsely claimed in his petition CV24-09-734 filed with County Court Law Number Two in Wise County on September 11, 2024, that he had entered an informal marriage/common law marriage with Respondent in 2017 that ended on March 31, 2024.

D. Due to Title 18 U.S. Code § 157 a federal law that prohibits bankruptcy fraud. Petitioner stated as fact and under oath in his Chapter 7 filed with the Eastern District of Texas on March 3, 2020, that his marital status was “Not Married” and marital status the prior 8 years in his Chapter 7 filing Chris checked, “No spouse or legal equivalent”. The case was open from March 3, 2020, and was discharged the first week in February of 2021. For this entire year of his bankruptcy Petitioner did not change his marital status for he was stating that he and Respondent were in fact “Not Married” in that time frame or within the 8 years prior as “common law”.

E. Respondent adamantly denies that an informal marriage/common law marriage ever existed. Respondent and Petitioner were only engaged from 2017 to mid-2022. Respondent officially rescinded the engagement, returning the engagement ring to Petitioner when rescinded, after years of complete instability in the relationship and living arrangements, along with conflict and abuse. Respondent and Petitioner were consistently packing up and moving out from each other’s dwelling for the entirety of the relationship. In mid-2022 the relationship ended to a casual relationship with separate dwellings, only remaining casual for the purpose of both parties were Plaintiffs in a civil defamation lawsuit filed in 2022 that was pending and to be scheduled for trial. Where the representing attorney for both Respondent and Petitioner did not and does not recognize them as married, and states they were not introduced to him in February of 2022 as formally or informally married to him nor listed as formally or

informally married in the defamation/breach of contract lawsuit. Once the Respondent wanted to settle the civil defamation lawsuit, and officially end all interactions with the Petitioner, only then did the Petitioner begin to “claim informal/common law marriage” as a means to remove Respondent from solely owned property and leverage assets belonging to Respondent. Since this Petition, Petitioner has been actively removing and selling off property owned by Respondent without Respondent’s acknowledgement or authorization.

F. Respondent has filed “Single” for all the years of Federal Tax Returns while in the inconsistent relationship with Petitioner. EXHIBIT 3

G. Petitioner acknowledges to Respondent in text in May of 2020 that a marriage does not exist, and desires to marry. EXHIBIT 4

H. Also, as recently as November 23, 2024, Petitioner acknowledges in text to Respondent that a marriage does not exist. EXHIBIT 5

I. There are also audio recordings between Petitioner and Respondent acknowledging no informal marriage exists or ever existed. Along with that there was no acknowledging each other from either as husband or wife.

J. Affidavit made by one of the closest friends of Petitioner and Respondent for the entire length of the relationship stating no informal marriage existed. EXHIBIT 6

K. Petitioner’s filing of CV24-09-734 filed with County Court Law Number Two in Wise County on September 11, 2024, is now fraudulently claiming with the County Court at Law, Number Two in Wise County, Texas that a “common law marriage” existed from 2017 to 2024. There is no documentation that exists stating Petitioner and Respondent as informally married or listed as spouses.

1. No Federal Tax Returns (all Tax Returns between Petitioner and Respondent were filed separately and as “Single”).
2. No insurance policies.
3. No property deed(s) with both names.

4. No lease agreements (all lease agreements between Petitioner and Respondent were separate).
5. No joint purchases ever.
6. No signed affidavit stating the intent to be married.
7. No common law marriage filing of declaration with the County Clerk.
8. No letters or correspondents or social media posts referring to each other as spouses or married.
9. Respondent has never used or signed her last name as Petitioner's last name.

L. There was only an engagement and only an engagement recognized privately and publicly by all close friends and both Petitioner and Respondent's family members. EXHIBIT 7

3. *Prayer*

Respondent recognizes herself as a devote Christian, she values the sanctity of marriage and marriage vows as a sacred institution. Respondent has been emotionally drained and traumatized by the actions, threats and abuse from Petitioner and is praying the Court relieves her of this repeated cycle that she is desperately trying to end. Respondent was deprived of a wedding day that both parties were financially, physically capable of and of sound mind to commit to over the past nine years, but Petitioner refused to ever commit to a marriage or even a conversation of marriage. After years of much conflict, Petitioner's addictions and denied commitment from Petitioner, Respondent rescinded the engagement between the parties in mid-2022. Respondent would never agree to an informal marriage to Petitioner, as Respondent had already been a party of an informal marriage from a previous relationship. Respondent is fifty-three years old and has never had a wedding day with vows exchanged with family and friends, she would never agree to or acknowledge an informal marriage with Petitioner. Respondent prays the Courts do not allow Petitioner's mockery of marriage to continue by attempting to perpetuate fraud upon the Courts and Respondent and dismiss the petition for lack of standing with prejudice.

Respectfully submitted,

DARCY GUSSE
PRO SE

A handwritten signature in black ink, appearing to read 'Darcy Gusse', written in a cursive style.

P.O. Box 81
Alvord, Texas 76225
Tel. (940) 799-6633

dm14designs@gmail.com

EXHIBIT 1

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF TEXAS

Case number (if known): _____ Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

Christopher

First Name

Michael

Middle Name

McCarthy

Last Name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First Name

Middle Name

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 7 1 7 2

OR

9xx - xx - _____

xxx - xx - _____

OR

9xx - xx - _____

Debtor 1 **Christopher Michael McCarthy**

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:

☐ I have not used any business names or EINs.

Landmark Development

Business name

Business name

Business name

EIN

EIN

About Debtor 2 (Spouse Only in a Joint Case):

☐ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

5. Where you live

4583 US Hwy 380

Number Street

Decatur TX 76234

City State ZIP Code

Wise

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7

☐ Chapter 11

☐ Chapter 12

☐ Chapter 13

Debtor 1 Christopher Michael McCarthy

Case number (if known) _____

8. How you will pay the fee
- ☒ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- ☒ No
☐ Yes.

District _____	When _____	Case number _____
	MM / DD / YYYY	
District _____	When _____	Case number _____
	MM / DD / YYYY	
District _____	When _____	Case number _____
	MM / DD / YYYY	

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No
☐ Yes.

Debtor _____	Relationship to you _____
District _____	When _____ Case number, _____
	MM / DD / YYYY if known
Debtor _____	Relationship to you _____
District _____	When _____ Case number, _____
	MM / DD / YYYY if known

11. Do you rent your residence?

- ☐ No. Go to line 12.
☒ Yes. Has your landlord obtained an eviction judgment against you?

- ☒ No. Go to line 12.
☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Christopher Michael McCarthy

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?
- ☐ No. Go to Part 4.
- ☒ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Landmark Development

Name of business, if any

4583 US Hwy 380

Number Street

Decatur

City

TX

State

76234

ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☒ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
- ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
- ☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No
- ☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1 **Christopher Michael McCarthy**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Christopher Michael McCarthy

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☐ No. I am not filing under Chapter 7. Go to line 18.
☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
☒ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|--|--|--|
| ☒ 1-49 | ☐ 1,000-5,000 | ☐ 25,001-50,000 |
| ☐ 50-99 | ☐ 5,001-10,000 | ☐ 50,001-100,000 |
| ☐ 100-199 | ☐ 10,001-25,000 | ☐ More than 100,000 |
| ☐ 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|--|--|
| ☒ \$0-\$50,000 | ☐ \$1,000,001-\$10 million | ☐ \$500,000,001-\$1 billion |
| ☐ \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | ☐ \$1,000,000,001-\$10 billion |
| ☐ \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | ☐ \$10,000,000,001-\$50 billion |
| ☐ \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|---|--|--|
| ☐ \$0-\$50,000 | ☐ \$1,000,001-\$10 million | ☐ \$500,000,001-\$1 billion |
| ☐ \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | ☐ \$1,000,000,001-\$10 billion |
| ☒ \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | ☐ \$10,000,000,001-\$50 billion |
| ☐ \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion |

Debtor 1 Christopher Michael McCarthy

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Christopher Michael McCarthy

Christopher Michael McCarthy, Debtor 1

Executed on 02/24/2020

MM / DD / YYYY

X _____

Signature of Debtor 2

Executed on _____

MM / DD / YYYY

Debtor 1 Christopher Michael McCarthy

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X /s/ Christopher B. Henry
Signature of Attorney for Debtor

Date 02/24/2020
MM / DD / YYYY

Christopher B. Henry
Printed name

Minor & Jester, P.C.
Firm Name

502 W. Oak St., Suite 200
Number Street

P.O. Box 280

Denton
City

TX
State

76202
ZIP Code

Contact phone (940) 387-7585

Email address chenry@minorandjester.com

24065400
Bar number

State

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION

In re Christopher Michael McCarthy

Case No. _____

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$2,000.00</u>
Prior to the filing of this statement I have received.....	<u>\$2,000.00</u>
Balance Due.....	<u>\$0.00</u>

2. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify)
3. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify)
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
Representation of debtor in any dischargeability actions, objection to discharge, judicial lien avoidances, relief from stay actions or any other contested matters or adversary proceedings except as specifically noted as included.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/24/2020

Date

/s/ Christopher B. Henry

Christopher B. Henry
Minor & Jester, P.C.
502 W. Oak St., Suite 200
P.O. Box 280
Denton, Texas 76202
Phone: (940) 387-7585 / Fax: (940) 808-0054

Bar No. 24065400

/s/ Christopher Michael McCarthy

Christopher Michael McCarthy

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
SHERMAN DIVISION**

IN RE: Christopher Michael McCarthy

CASE NO.

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 2/24/2020

Signature /s/ Christopher Michael McCarthy
Christopher Michael McCarthy

Date _____

Signature _____

American Express
P.O. Box 981537
El Paso, TX 79998

Child Support Recovery
1305 E. Walnut St.
Des Moines, IA 50319

Internal Revenue Service
Centralized Insolvency
P.O. Box 7346
Philadelphia, PA 19101-7346

Melinda Barefoot
c/o Gracie Garcia
Kelly Hart & Hallman, LLP
201 Main St., Suite 2500
Fort Worth, Texas 76102

Midland Funding
2365 Northside
Suite 300
San Diego, CA 92108

Portfolio Recovery
120 Corporate Blvd., Ste. 100
Norfolk, VA 23502

RIAFUCU
PO Box 4750
Rock Island, IL 61204

Synchrony Bank/Lowes
4125 Windword Plaza Dr
Alpharetta, GA 30005

Tres Poyner
c/o Gracie Garcia
Kelly Hart & Hallman, LLP
201 Main St., Suite 2500
Fort Worth, Texas 76102

EXHIBIT 2

Fill in this information to identify your case:

Debtor 1	<u>Christopher</u>	<u>Michael</u>	<u>McCarthy</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)	<u>20-40555</u>		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1
lived there

Debtor 2:

Dates Debtor 2
lived there

☐ Same as Debtor 1

☐ Same as Debtor 1

207 CR 3214

Number Street

From 02/01/2016

To 10/06/2018

Number Street

From

To

Bridgeport

City

Tx

State ZIP Code

City

State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips ☒ Operating a business	☐ Wages, commissions, bonuses, tips ☐ Operating a business
	\$0.00	
For the last calendar year: (January 1 to December 31, <u>2019</u>)	☐ Wages, commissions, bonuses, tips ☒ Operating a business	☐ Wages, commissions, bonuses, tips ☐ Operating a business
	\$7,532.00	
For the calendar year before that: (January 1 to December 31, <u>2018</u>)	☐ Wages, commissions, bonuses, tips ☒ Operating a business	☐ Wages, commissions, bonuses, tips ☐ Operating a business
	\$14,077.00	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☒ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

- ☒ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
RIAFCU		\$1,260.00	\$9,592.87	☐ Mortgage
Creditor's name				☒ Car
PO Box 4750	Monthly (Last 90 Days)			☐ Credit card
Number Street				☐ Loan repayment
				☐ Suppliers or vendors
				☐ Other
Rock Island	IL	61204		
City	State	ZIP Code		

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No.
☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title Melinda Barefoot et al v. Chris McCarthy
Nature of the case Breach of Contract

Court or agency 271st District Court of Wise Co., Texas Status of the case

Court Name PO Box 308

Number PO Box 308 Street

Number PO Box 308 Street

- ☒ Pending
☐ On appeal
☐ Concluded

Case number CV19-10-840

Decatur Tx 76234
City State ZIP Code

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No.
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No.
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No.
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No.
☒ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Cash			
Minor & Jester, P.C.			
Person Who Was Paid			
502 W. Oak St., Suite 200		01/06/2020	\$2,000.00
Number Street			
P.O. Box 280			
Denton TX 76202			
City State ZIP Code			
www.minorandjester.com			
Email or website address			

Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No.
☐ Yes. Fill in the details.

Debtor 1 **Christopher Michael McCarthy**

Case number (if known) **20-40555**

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☐ No
☒ Yes. Fill in the details.

	Who else has or had access to it?	Describe the contents	Do you still have it?
Decatur Storage	n/a	Household Goods	☐ No
Name of Storage Facility	Name		☒ Yes
1100 E. Bus 380			
Number Street	Number Street		
Decatur	Tx 76234		
City	State ZIP Code	City State ZIP Code	

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Christopher Michael McCarthy

Case number (if known) 20-40555

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.
☒ Yes. Check all that apply above and fill in the details below for each business.

Landmark Development

Business Name

4583 US Hwy 380

Number Street

Describe the nature of the business.
Construction

Name of accountant or bookkeeper
n/a

Employer Identification number
Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From 03/01/2019 To 12/31/2019

Decatur TX 76234
City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Christopher Michael McCarthy

Christopher Michael McCarthy, Debtor 1

Date 03/03/2020

X _____

Signature of Debtor 2

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

EXHIBIT 3

Form **8879****IRS e-file Signature Authorization**

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

► Return completed Form 8879 to your ERO. (Do not send to IRS.)

► Go to www.irs.gov/Form8879 for the latest information.**2017**

Submission Identification Number (SID) ►

Taxpayer's name

DARCY GUSSE

Spouse's name

Social security number

~~123-45-6789~~ **418**

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2017 (Whole dollars only)

1	Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4; Form 1040NR, line 37)	1	6,594.
2	Total tax (Form 1040, line 63; Form 1040A, line 39; Form 1040EZ, line 12; Form 1040NR, line 61)	2	
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 64; Form 1040A, line 40; Form 1040EZ, line 7; Form 1040NR, line 62a)	3	343.
4	Refund (Form 1040, line 76a; Form 1040A, line 48a; Form 1040EZ, line 13a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	846.
5	Amount you owe (Form 1040, line 78; Form 1040A, line 50; Form 1040EZ, line 14; Form 1040NR, line 75) ..	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2017, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize Mitzi E. Sullivan, CPA to enter or generate my PIN 33523
ERO firm name Enter five digits, but don't enter all zeros

as my signature on my tax year 2017 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2017 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ►

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____
ERO firm name Enter five digits, but don't enter all zeros

as my signature on my tax year 2017 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2017 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

80995012345

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2017 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► Mitzi Sullivan

Date ►

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8879 (2017)

Form **1040** Department of the Treasury Internal Revenue Service (99) **U.S. Individual Income Tax Return 2017** OMB No. 1545-0074 IRS Use Only — Do not write or staple in this space.

For the year Jan. 1 - Dec. 31, 2017, or other tax year beginning , 2017, ending , 20 See separate instructions.

Your first name and initial Last name Your social security number

DARCY GUSSE 418

If a joint return, spouse's first name and initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. Make sure the SSN(s) above and on line 6c are correct.

207 CR 3214

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

BRIDGEPORT, TX 76426

Foreign country name Foreign province/state/country Foreign postal code

Presidential Election Campaign. Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status 1 ☒ Single 4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. 2 ☐ Married filing jointly (even if only one had income) 5 ☐ Qualifying widow(er) (see instructions) 3 ☐ Married filing separately. Enter spouse's SSN above & full name here. Check only one box.

Exemptions 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a. Boxes checked on 6a and 6b 1

b ☐ Spouse. No. of children on 6c who:

c Dependents:

(1) First name Last name (2) Dependent's social security number (3) Dependent's relationship to you (4) ☒ if child under age 17 qualifying for child tax credit (see instructions)

If more than four dependents, see instructions and check here. ☐ • lived with you. • did not live with you due to divorce or separation (see instructions). Dependents on 6c not entered above. Add numbers on lines above 1

d Total number of exemptions claimed. 1

Income 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 6,594.

8a Taxable interest. Attach Schedule B if required. 8a

b Tax-exempt interest. Do not include on line 8a 8b

9a Ordinary dividends. Attach Schedule B if required. 9a

b Qualified dividends 9b

10 Taxable refunds, credits, or offsets of state and local income taxes. 10

11 Alimony received. 11

12 Business income or (loss). Attach Schedule C or C-EZ. 12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here. 13

14 Other gains or (losses). Attach Form 4797. 14

15a IRA distributions. 15a b Taxable amount. 15b

16a Pensions and annuities. 16a b Taxable amount. 16b

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E. 17

18 Farm income or (loss). Attach Schedule F. 18

19 Unemployment compensation. 19

20a Social security benefits. 20a b Taxable amount. 20b

21 Other income. List type and amount. 21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income. 22 6,594.

Adjusted Gross Income 23 Educator expenses. 23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ. 24

25 Health savings account deduction. Attach Form 8889. 25

26 Moving expenses. Attach Form 3903. 26

27 Deductible part of self-employment tax. Attach Schedule SE. 27

28 Self-employed SEP, SIMPLE, and qualified plans. 28

29 Self-employed health insurance deduction. 29

30 Penalty on early withdrawal of savings. 30

31a Alimony paid b Recipient's SSN. 31a

32 IRA deduction. 32

33 Student loan interest deduction. 33

34 Tuition and fees. Attach Form 8917. 34

35 Domestic production activities deduction. Attach Form 8903. 35

36 Add lines 23 through 35. 36 0.

37 Subtract line 36 from line 22. This is your adjusted gross income. 37 6,594.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. FDIA0112L 02/22/18 Form 1040 (2017)

Tax and Credits**Standard Deduction for —**

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:
Single or Married filing separately, \$6,350

Married filing jointly or Qualifying widow(er), \$12,700

Head of household, \$9,350

38 Amount from line 37 (adjusted gross income) 38 6,594.

39a Check ☐ You were born before January 2, 1953, ☐ Blind. Total boxes checked ☐ 39a ☐ if: ☐ Spouse was born before January 2, 1953, ☐ Blind. ☐ 39b ☐b If your spouse itemizes on a separate return or you were a dual-status alien, check here ☐ 39b ☐

40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 40 6,350.

41 Subtract line 40 from line 38 41 244.

42 Exemptions. If line 38 is \$156,900 or less, multiply \$4,050 by the number on line 6d. Otherwise, see instrs. 42 4,050.

43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 43 0.

44 Tax (see instructions). Check if any from: a ☐ Form(s) 8814 c ☐ 44 0.b ☐ Form 4972 45 0.

45 Alternative minimum tax (see instructions). Attach Form 6251 45 0.

46 Excess advance premium tax credit repayment. Attach Form 8962 46 0.

47 Add lines 44, 45, and 46 47 0.

48 Foreign tax credit. Attach Form 1116 if required 48

49 Credit for child and dependent care expenses. Attach Form 2441 49

50 Education credits from Form 8863, line 19 50

51 Retirement savings contributions credit. Attach Form 8880 51

52 Child tax credit. Attach Schedule 8812, if required 52

53 Residential energy credits. Attach Form 5695 53

54 Other crs from Form: a ☐ 3800 b ☐ 8801 c ☐ 54

55 Add lines 48 through 54. These are your total credits 55

56 Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- 56 0.

Other Taxes

57 Self-employment tax. Attach Schedule SE 57

58 Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919 58

59 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required 59

60a Household employment taxes from Schedule H 60a

b First-time homebuyer credit repayment. Attach Form 5405 if required 60b

61 Health care: individual responsibility (see instructions) Full-year coverage ☐ 6162 Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instrs; enter code(s) 62

63 Add lines 56 through 62. This is your total tax 63 0.

Payments

If you have a qualifying child, attach Schedule EIC.

64 Federal income tax withheld from Forms W-2 and 1099 64 343.

65 2017 estimated tax payments and amount applied from 2016 return 65

66a Earned income credit (EIC) 66a 503.

b Nontaxable combat pay election ☐ 66b

67 Additional child tax credit. Attach Schedule 8812 67

68 American opportunity credit from Form 8863, line 8 68

69 Net premium tax credit. Attach Form 8962 69

70 Amount paid with request for extension to file 70

71 Excess social security and tier 1 RRTA tax withheld 71

72 Credit for federal tax on fuels. Attach Form 4136 72

73 Credits from Form: a ☐ 2439 b ☐ Reserved c ☐ 8885 d ☐ 73

74 Add lines 64, 65, 66a, and 67 through 73. These are your total payments 74 846.

Refund

75 If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid 75 846.

76a Amount of line 75 you want refunded to you. If Form 8888 is attached, check here ☐ 76a 846.b Routing number XXXXXXXXXXXX c Type: ☐ Checking ☐ Savings

d Account number XXXXXXXXXXXXXXXXXXXXXXXXXXXX

77 Amount of line 75 you want applied to your 2018 estimated tax 77

Amount You Owe

78 Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions 78

79 Estimated tax penalty (see instructions) 79

Third Party DesigneeDo you want to allow another person to discuss this return with the IRS (see instructions)? ☒ Yes. Complete below. ☐ NoDesignee's name ☐ Mitzi Sullivan Phone no. ☐ (940) 539-3238 Personal identification number (PIN) ☐ 12345**Sign Here**

Joint return? See instructions.

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature _____ Date _____ Your occupation _____ Daytime phone number _____

Spouse's signature. If a joint return, both must sign. _____ Date _____ Spouse's occupation _____ If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____

Paid Preparer Use OnlyPrint/Type preparer's name _____ Preparer's signature _____ Date _____ Check ☒ if self-employed PTIN _____Firm's name ☐ Mitzi E. Sullivan, CPA Firm's EIN ☐ 87-4002345Firm's address ☐ 506 W. Walnut St Decatur, TX 76234 Phone no. ☐ 940-539-3238

Form **8879**Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

► Return completed Form 8879 to your ERO. (Don't send to the IRS.)

► Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

2018

Submission Identification Number (SID) ► 809950201928702bqzo3

Taxpayer's name

Social security number

DARCY GUSSE

~~88-88-8418~~

Spouse's name

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2018 (Whole dollars only)

1	Adjusted gross income (Form 1040, line 7; Form 1040NR, line 35)	1	8,456.
2	Total tax (Form 1040, line 15; Form 1040NR, line 61)	2	
3	Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a)	3	579.
4	Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a)	4	1,098.
5	Amount you owe (Form 1040, line 22; Form 1040NR, line 75)	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize Mitzi E. Sullivan, CPA to enter or generate my PIN 41556
ERO firm name Enter five digits, but don't enter all zeros

as my signature on my tax year 2018 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ► _____ Date ► _____

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____
ERO firm name Enter five digits, but don't enter all zeros

as my signature on my tax year 2018 electronically filed income tax return.

☐ I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ► _____ Date ► _____

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

80995012345
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► Mitzi Sullivan

Date ► _____

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8879 (2018)

Filing status: ☒ Single ☐ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er)

Your first name and initial **DARCY GUSSE** Last name _____ Your social security number **321-78-3418**

Your standard deduction: ☐ Someone can claim you as a dependent ☐ You were born before January 2, 1954 ☐ You are blind

If joint return, spouse's first name and initial _____ Last name _____ Spouse's social security number _____

Spouse standard deduction: ☐ Someone can claim your spouse as a dependent ☐ Spouse was born before January 2, 1954 ☒ Full-year health care coverage or exempt (see inst.)

☐ Spouse is blind ☐ Spouse itemizes on a separate return or you were dual-status alien

Home address (number and street). If you have a P.O. box, see instructions. **PO BOX 1973** Apt. no. _____ Presidential Election Campaign (see inst.) ☐ You ☐ Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6. **DECATUR, TX 76234** If more than four dependents, see inst. and ☒ here ☐

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ☒ If qualifies for (see inst.):	
(1) First name	Last name			Child tax credit	Credit for other dependents

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature _____ Date _____ Your occupation **GRAPHIC DESIGNER** If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature, if a joint return, both must sign. _____ Date _____ Spouse's occupation _____ If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Paid Preparer Use Only

Preparer's name **Mitzi Sullivan** Preparer's signature **Mitzi Sullivan** PTIN **P00632646** Firm's EIN **87-4002345** Check if: ☒ 3rd Party Designee ☒ Self-employed

Firm's name **Mitzi E. Sullivan, CPA** Phone no. **940-539-3238**

Firm's address **506 W Walnut St**
Decatur, TX 76234

Attach Form(s) W-2. Also attach Form(s) W-2G and 1099-R if tax was withheld.

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	17,326.
2a	Tax-exempt interest	2a	
3a	Qualified dividends	3a	
4a	IRAs, pensions, and annuities	4a	
5a	Social security benefits	5a	
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22	6	-8,870.
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6	7	8,456.
8	Standard deduction or itemized deductions (from Schedule A)	8	12,000.
9	Qualified business income deduction (see instructions)	9	
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-	10	0.
11	a Tax (see inst.) 0. (check if any from: 1 ☐ Form(s) 8814 2 ☐ Form 4972 3 ☐)	11	0.
12	b Add any amount from Schedule 2 and check here	12	
13	a Child tax credit/credit for other dependents	13	0.
14	b Add any amount from Schedule 3 and check here	14	
15	Subtract line 12 from line 11. If zero or less, enter -0-	15	0.
16	Other taxes. Attach Schedule 4	16	579.
17	Total tax. Add lines 13 and 14	17	519.
18	Federal income tax withheld from Forms W-2 and 1099	18	1,098.
19	Refundable credits: a EIC (see inst.) 519. b Sch. 8812 c Form 8863	19	1,098.
20	Add any amount from Schedule 5	20a	1,098.
21	Add lines 16 and 17. These are your total payments	21	
22	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid	22	
23	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here	23	
24	a Routing number XXXXXXXXXX b Type: ☐ Checking ☐ Savings		
25	d Account number XXXXXXXXXXXXXXXXXXXXXXXXXX		
26	Amount of line 19 you want applied to your 2019 estimated tax		
27	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions		
28	Estimated tax penalty (see instructions)		

Form **9465**

(Rev. December 2018)

Department of the Treasury
Internal Revenue Service**Installment Agreement Request**

- Go to www.irs.gov/Form9465 for instructions and the latest information.
 ► If you are filing this form with your tax return, attach it to the front of the return.
 ► See separate instructions.

OMB No. 1545-0074

Tip: If you owe \$50,000 or less, you may be able to avoid filing Form 9465 and establish an installment agreement online, even if you haven't yet received a tax bill. Go to www.irs.gov/OPA to apply for an Online Payment Agreement.

Part IThis request is for Form(s) (for example, Form 1040 or Form 941) ► **Form 1040**

Enter tax year(s) or period(s) involved (for example, 2016 and 2017, or January 1, 2017 to June 30, 2017) ►

2019

1 a Your first name and initial DARCY	Last name GUSSE	Your social security number 331-33418
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
Current address (number and street). If you have a P.O. box and no home delivery, enter your box number. PO BOX 1973		Apartment number
City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions). DECATUR, TX 76234		
Foreign country name	Foreign province/state/county	Foreign postal code

1 b If this address is new since you filed your last tax return, check here. ☐**2** Name of your business (must no longer be operating) Employer identification number (EIN)

3 (817) 470-2021 Your home phone number	12:00 Best time for us to call	4 (940) 255-3615 Your work phone number	12:00 Best time for us to call
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5 Enter the total amount you owe as shown on your tax return(s) (or notice(s))	5	3,746.
6 If you have any additional balances due that aren't reported on line 5, enter the amount here (even if the amounts are included in an existing installment agreement)	6	
7 Add lines 5 and 6 and enter the result	7	3,746.
8 Enter the amount of any payment you're making with this request. See instructions	8	500.
9 Amount owed. Subtract line 8 from line 7 and enter the result	9	3,246.
10 Divide the amount on line 9 by 72 and enter the result	10	45.
11 a Enter the amount you can pay each month. Make your payment as large as possible to limit interest and penalty charges, as these charges will continue to accrue until you pay in full. If you have an existing installment agreement, this amount should represent your total proposed monthly payment amount for all your liabilities. If no payment amount is listed on line 11a, a payment will be determined for you by dividing the balance due on line 9 by 72 months	11 a	500.
b If the amount on line 11a is less than the amount on line 10 and you're able to increase your payment to an amount that is equal to or greater than the amount on line 10, enter your revised monthly payment. • If you can't increase your payment on line 11b to more than or equal to the amount shown on line 10, check the box. Also, complete and attach Form 433-F, Collection Information Statement. • If the amount on line 11a (or 11b, if applicable) is more than or equal to the amount on line 10 and the amount you owe is over \$25,000 but not more than \$50,000, then you don't have to complete Form 433-F. However, if you don't complete Form 433-F, then you must complete either line 13 or 14. • If the amount on line 9 is greater than \$50,000, complete and attach Form 433-F.	11 b	
12 Enter the date you want to make your payment each month. Don't enter a date later than the 28th	12	1st

13 If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines 13a and 13b. This is the most convenient way to make your payments and it will ensure that they are made on time.

► **a** Routing number **071101307**

► **b** Account number **6533642622**

I authorize the U.S. Treasury and its designated Financial Agent to initiate a monthly ACH debit (electronic withdrawal) entry to the financial institution account indicated for payments of my federal taxes owed, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke payment, I must contact the U.S. Treasury Financial Agent at 1-800-829-1040 no later than 14 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payments of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payments.

c Low-income taxpayers only. If you're unable to make electronic payments through a debit instrument by providing your banking information on lines 13a and 13b, check this box and your user fee will be reimbursed upon completion of your installment agreement. See instructions. ☐

14 If you want to make payments by payroll deduction, check this box and attach a completed Form 2159. ☐

Your signature	Date	Spouse's signature. If a joint return, both must sign.	Date
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Form **1040** Department of the Treasury — Internal Revenue Service (99) **2019** U.S. Individual Income Tax Return OMB No. 1545-0074 IRS Use Only — Do not write or staple in this space.

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent. ▶

Your first name and middle initial **DARCY GUSSE** Last name **GUSSE** Your social security number **3418**

If joint return, spouse's first name and middle initial Last name Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. Apt. no. **PO BOX 1973**
 City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). **DECATUR, TX 76234**

Foreign country name Foreign province/state/county Foreign postal code Presidential Election Campaign
 Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent ☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1955 ☐ Are blind Spouse: ☐ Was born before January 2, 1955 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ☒ if qualifies for (see instructions):	
(1) First name	Last name			Child tax credit	Credit for other dependents

1	Wages, salaries, tips, etc. Attach Form(s) W-2	1	15,701.
2a	Tax-exempt interest	2a	
		b	Taxable int. Att. Sch. B if reqd.
3a	Qualified dividends	3a	
		b	Ordinary div. Att. Sch. B if reqd.
4a	IRA distributions	4a	
		b	Taxable amount
c	Pensions and annuities	4c	
		d	Taxable amount
5a	Social security benefits	5a	
		b	Taxable amount
6	Capital gain or (loss). Attach Schedule D if required. If not required, check here	6	
7a	Other income from Schedule 1, line 9	7a	17,642.
b	Add lines 1, 2b, 3b, 4b, 4d, 5b, 6, and 7a. This is your total income	7b	33,343.
8a	Adjustments to income from Schedule 1, line 22	8a	1,247.
b	Subtract line 8a from line 7b. This is your adjusted gross income	8b	32,096.
9	Standard deduction or itemized deductions (from Schedule A)	9	12,200.
10	Qualified business income deduction. Attach Form 8995 or Form 8995-A	10	1,505.
11a	Add lines 9 and 10	11a	13,705.
b	Taxable income. Subtract line 11a from line 8b. If zero or less, enter -0-	11b	18,391.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions. Form 1040 (2019)

Standard Deduction for —
 • Single or Married filing separately, \$12,200
 • Married filing jointly or Qualifying widow(er), \$24,400
 • Head of household, \$18,350
 • If you checked any box under Standard Deduction, see instructions.

12a Tax (see inst.) Check if any from Form(s): 1 ☐ 88142 ☐ 49723 ☐

12a 2,011.

b Add Schedule 2, line 3, and line 12a and enter the total 12b 2,011.

13a Child tax credit or credit for other dependents: 13a

b Add Schedule 3, line 7, and line 13a and enter the total 13b

14 Subtract line 13b from line 12b. If zero or less, enter -0- 14 2,011.

15 Other taxes, including self-employment tax, from Schedule 2, line 10. 15 2,493.

16 Add lines 14 and 15. This is your total tax 16 4,504.

17 Federal income tax withheld from Forms W-2 and 1099. 17 758.

18 Other payments and refundable credits:

a Earned income credit (EIC) 18a

b Additional child tax credit. Attach Schedule 8812. 18b

c American opportunity credit from Form 8863, line 8. 18c

d Schedule 3, line 14. 18d

e Add lines 18a through 18d. These are your total other payments and refundable credits 18e

19 Add lines 17 and 18e. These are your total payments. 19 758.

Refund

20 If line 19 is more than line 16, subtract line 16 from line 19. This is the amount you overpaid. 20

21 a Amount of line 20 you want refunded to you. If Form 8888 is attached, check here. ☐ 21aDirect deposit?
See instructions.b Routing number c Type: ☐ Checking ☐ Savingsd Account number

22 Amount of line 20 you want applied to your 2020 estimated tax 22 23 3,746.

Amount

You Owe

23 Amount you owe. Subtract line 19 from line 16. For details on how to pay, see instructions. 23

24 Estimated tax penalty (see instructions). 24

Third Party
Designee(Other than
paid preparer)Do you want to allow another person (other than your paid preparer) to discuss this return with the IRS? See instructions. ☐ Yes. Complete below.☒ No

Designee's name

Phone no.

Personal identification number (PIN)

Sign
HereJoint return?
See instructions.
Keep a copy for
your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date

Your occupation

GRAPHIC DESIGNER

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)

Phone no. (817) 470-2021

Email address dm14 designs@outlook.com

Paid
Preparer
Use Only

Preparer's name

Mitzi Sullivan

Preparer's signature

Mitzi Sullivan

Date

PTIN

P00632646

Check if:

☒ 3rd Party Designee☒ Self-employed

Firm's name ▶ Mitzi E. Sullivan, CPA

Phone no. 940-539-3238

Firm's address ▶ 506 W Walnut St
Decatur, TX 76234

Firm's EIN ▶ 87-4002345

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

▶ ERO must obtain and retain completed Form 8879.

▶ Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID) ▶ 8099502021286057cgyx

Taxpayer's name

DARCY GUSSE

Spouse's name

Social security number

[REDACTED] 418

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2020 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	49,330.
2	Total tax	2	10,846.
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	
4	Amount you want refunded to you	4	
5	Amount you owe	5	8,129.

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize Mitzi E. Sullivan, CPA to enter or generate my PIN 43188 as my
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ▶

Date ▶

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____ as my
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ▶

Date ▶

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

80995012345

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ▶ Mitzi Sullivan

Date ▶

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8879 (Rev. 01-2021)

Form **9465**

(Rev. September 2020)

Department of the Treasury
Internal Revenue Service**Installment Agreement Request**

- Go to www.irs.gov/Form9465 for instructions and the latest information.
 ► If you are filing this form with your tax return, attach it to the front of the return.
 ► See separate instructions.

OMB No. 1545-0074

Tip: If you owe \$50,000 or less, you may be able to avoid filing Form 9465 and establish an installment agreement online, even if you haven't yet received a tax bill. Go to www.irs.gov/OPA to apply for an Online Payment Agreement. If you establish your installment agreement using the Online Payment Agreement application, the user fee that you pay will be lower than it would be with Form 9465.

Part I Installment Agreement RequestThis request is for Form(s) (for example, Form 1040 or Form 941) ► **Form 1040**

Enter tax year(s) or period(s) involved (for example, 2018 and 2019, or January 1, 2019, to June 30, 2019) ►

2020

1 a Your first name and initial DARCY	Last name GUSSE	Your social security number 8-2-3418
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
Current address (number and street). If you have a P.O. box and no home delivery, enter your box number. PO BOX 81		Apartment number
City, town or post office, state, and ZIP code. If a foreign address, also complete the spaces below (see instructions). ALVORD, TX 76225		
Foreign country name	Foreign province/state/county	Foreign postal code

1 b If this address is new since you filed your last tax return, check here. ☐**2** Name of your business (must no longer be operating) Employer identification number (EIN)

3 817 470-2021 Your home phone number	12:00 Best time for us to call	4 940 255-3615 Your work phone number	Extension	12:00 Best time for us to call
--	--	--	-----------	--

5 Enter the total amount you owe as shown on your tax return(s) (or notice(s))	5	8,129.
6 If you have any additional balances due that aren't reported on line 5, enter the amount here (even if the amounts are included in an existing installment agreement)	6	
7 Add lines 5 and 6 and enter the result	7	8,129.
8 Enter the amount of any payment you're making with this request. See instructions	8	350.
9 Amount owed. Subtract line 8 from line 7 and enter the result	9	7,779.
10 Divide the amount on line 9 by 72.0 and enter the result	10	108.
11 a Enter the amount you can pay each month. Make your payment as large as possible to limit interest and penalty charges, as these charges will continue to accrue until you pay in full. If you have an existing installment agreement, this amount should represent your total proposed monthly payment amount for all your liabilities. If no payment amount is listed on line 11a, a payment will be determined for you by dividing the balance due on line 9 by 72 months	11 a	350.
b If the amount on line 11a is less than the amount on line 10 and you're able to increase your payment to an amount that is equal to or greater than the amount on line 10, enter your revised monthly payment.	11 b	
• If you can't increase your payment on line 11b to more than or equal to the amount shown on line 10, check the box. Also, complete and attach Form 433-F, Collection Information Statement. • If the amount on line 11a (or 11b, if applicable) is more than or equal to the amount on line 10 and the amount you owe is over \$25,000 but not more than \$50,000, then you don't have to complete Form 433-F. However, if you don't complete Form 433-F, then you must complete either line 13 or 14. • If the amount on line 9 is greater than \$50,000, complete and attach Form 433-F.		
12 Enter the date you want to make your payment each month. Don't enter a date later than the 28th	12	1st
13 If you want to make your payments by direct debit from your checking account, see the instructions and fill in lines 13a and 13b. This is the most convenient way to make your payments and it will ensure that they are made on time.		

► a Routing number **111903290** ► b Account number **1001332271**

I authorize the U.S. Treasury and its designated Financial Agent to initiate a monthly ACH debit (electronic withdrawal) entry to the financial institution account indicated for payments of my federal taxes owed, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke payment, I must contact the U.S. Treasury Financial Agent at 1-800-829-1040 no later than 14 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payments of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payments.

c Low-income taxpayers only. If you're unable to make electronic payments through a debit instrument by providing your banking information on lines 13a and 13b, check this box and your user fee will be reimbursed upon completion of your installment agreement. See instructions.

14 If you want to make payments by payroll deduction, check this box and attach a completed Form 2159.

By signing and submitting this form, I authorize the IRS to contact third parties and to disclose my tax information to third parties in order to process this request and administer the agreement over its duration. I also agree to the terms of this agreement, as provided in the instructions, if it's approved by the IRS.

Your signature	Date	Spouse's signature. If a joint return, both must sign.	Date
----------------	------	--	------

Filing Status ☒ Single ☐ Married filing jointly. ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial DARCY GUSSE		Last name GUSSE	Your social security number 418
If joint return, spouse's first name and middle initial		Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. PO BOX 81			Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. ALVORD, TX 76225		Apt. no.	
Foreign country name	Foreign province/state/county	Foreign postal code	

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency? ☐ Yes ☒ No

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1956 ☐ Are blind Spouse: ☐ Was born before January 2, 1956 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ☒ If qualifies for (see instructions):	
If more than four dependents, see instructions and check here ▶ ☐	(1) First name Last name			Child tax credit	Credit for other dependents

1 Wages, salaries, tips, etc. Attach Form(s) W-2		1
2a Tax-exempt interest	2a	2b Taxable interest
3a Qualified dividends	3a	3b Ordinary dividends
4a IRA distributions	4a	4b Taxable amount
5a Pensions and annuities	5a	5b Taxable amount
6a Social security benefits	6a	6b Taxable amount
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		7
8 Other income from Schedule 1, line 9		8 53,080.
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income		9 53,080.
10 Adjustments to income:		
a From Schedule 1, line 22	10a 3,750.	
b Charitable contributions if you take the standard deduction. See instructions	10b	
c Add lines 10a and 10b. These are your total adjustments to income		10c 3,750.
11 Subtract line 10c from line 9. This is your adjusted gross income		11 49,330.
12 Standard deduction or itemized deductions (from Schedule A)		12 12,400.
13 Qualified business income deduction . Attach Form 8995 or Form 8995-A		13 7,386.
14 Add lines 12 and 13		14 19,786.
15 Taxable income . Subtract line 14 from line 11. If zero or less, enter -0-		15 29,544.

Standard Deduction for —
 • Single or Married filing separately, \$12,400
 • Married filing jointly or Qualifying widow(er), \$24,800
 • Head of household, \$18,650
 • If you checked any box under **Standard Deduction**, see instructions.

Form **8879**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service**IRS e-file Signature Authorization**

- ERO must obtain and retain completed Form 8879.
- Go to www.irs.gov/Form8879 for the latest information.

OMB No. 1545-0074

Submission Identification Number (SID) ►

Taxpayer's name

DARCY GUSSE

Spouse's name

Social security number

321-78-3418

Spouse's social security number

Part I Tax Return Information – Tax Year Ending December 31, 2021 (Enter year you are authorizing.)

Enter whole dollars only on lines 1 through 5.

Note: Form 1040-SS filers use line 4 only. Leave lines 1, 2, 3, and 5 blank.

1	Adjusted gross income	1	1.
2	Total tax	2	
3	Federal income tax withheld from Form(s) W-2 and Form(s) 1099	3	
4	Amount you want refunded to you	4	
5	Amount you owe	5	

Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of the income tax return (original or amended) I am now authorizing, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from the income tax return (original or amended) I am now authorizing. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for the income tax return (original or amended) I am now authorizing and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

☒ I authorize MITZI E. SULLIVAN, CPA to enter or generate my PIN 48666 as my
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ►

Date ►

Spouse's PIN: check one box only

☐ I authorize _____ to enter or generate my PIN _____ as my
ERO firm name Enter five digits, but don't enter all zeros

signature on the income tax return (original or amended) I am now authorizing.

☐ I will enter my PIN as my signature on the income tax return (original or amended) I am now authorizing. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ►

Date ►

Practitioner PIN Method Returns Only – continue below**Part III Certification and Authentication – Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

80995012345

Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the electronic individual income tax return (original or amended) I am now authorized to file for tax year indicated above for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ► **MITZI SULLIVAN**

Date ►

ERO Must Retain This Form – See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8879 (Rev. 01-2021)

Form **1040** Department of the Treasury — Internal Revenue Service(99)
U.S. Individual Income Tax Return

2021

OMB No. 1545-0074

IRS Use Only — Do not write or staple in this space.

Filing Status ☒ Single ☐ Married filing jointly ☐ Married filing separately (MFS) ☐ Head of household (HOH) ☐ Qualifying widow(er) (QW)
 Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ▶

Your first name and middle initial DARCY GUSSE		Last name	Your social security number 301-418
If joint return, spouse's first name and middle initial		Last name	Spouse's social security number
Home address (number and street). If you have a P.O. box, see instructions. PO BOX 81			Presidential Election Campaign Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
City, town, or post office. If you have a foreign address, also complete spaces below. ALVORD, TX 76225			
Foreign country name	Foreign province/state/county	Foreign postal code	

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency? ☐ Yes ☒ No

Standard Deduction Someone can claim: ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness You: ☐ Were born before January 2, 1957 ☐ Are blind Spouse: ☐ Was born before January 2, 1957 ☐ Is blind

Dependents (see instructions):		(2) Social security number	(3) Relationship to you	(4) ✓ if qualifies for (see instructions):	
If more than four dependents, see instructions and check here ▶ ☐	(1) First name Last name			Child tax credit	Credit for other dependents

1 Wages, salaries, tips, etc. Attach Form(s) W-2		1
Attach Sch. B if required.	2a Tax-exempt interest	2a
	3a Qualified dividends	3a
	4a IRA distributions	4a
	5a Pensions and annuities	5a
	6a Social security benefits	6a
7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		7
8 Other income from Schedule 1, line 10		8 1.
9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income .		9 1.
10 Adjustments to income from Schedule 1, line 26		10
11 Subtract line 10 from line 9. This is your adjusted gross income		11 1.
Standard Deduction for — • Single or Married filing separately, \$12,550 • Married filing jointly or Qualifying widow(er), \$25,100 • Head of household, \$18,800 • If you checked any box under Standard Deduction , see instructions.	12a Standard deduction or itemized deductions (from Schedule A)	12a 12,550.
	b Charitable contributions if you take the standard deduction (see instructions)	12b
	c Add lines 12a and 12b	12c 12,550.
13 Qualified business income deduction from Form 8995 or Form 8995-A		13
14 Add lines 12c and 13		14 12,550.
15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0-		15 0.

BAA For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

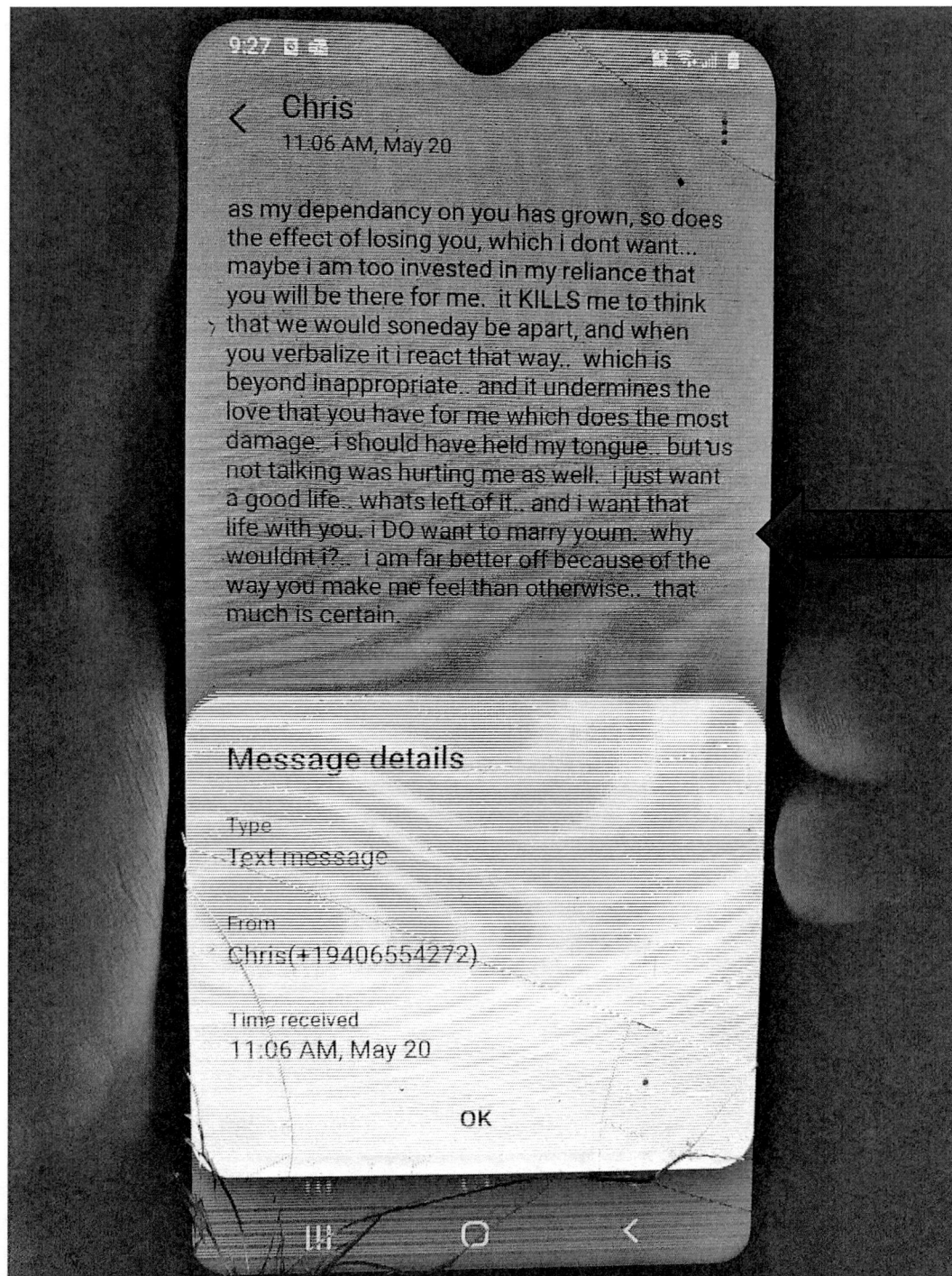
Form 1040 (2021)

TEXT MESSAGE FROM CHRIS, PETITIONER

TO DARCY, RESPONDENT

ON MAY 20, 2020 ACKNOWLEDGING NOT MARRIED.

EXHIBIT 4



Wednesday, May 23, 2020

It be in town if you want to have
lunch. In town if you want to have

too soon?

10:47 AM

I am sorry for saying what I said
to you and regret not talking
to to you instead of blowing up
but you ripped my world to
out from under me when you said
you were leaving. I already have
many other issues and you are
the only person I can talk to about
things that are right in front of me.

View all

View all

as my dependency on you has
grown so does the effect of
losing you which I don't want
maybe I am overreacting
reliance that you will be there
for me. I KILL. I am so thick that
we would be better off apart
and when you realize the
that was wrong. I am sorry I read
that you are not a person
in a hospital and it

View all

View all

EXHIBIT 5

11:15

42%



Chris



Such a load of shit.. but you live me.. I don't think so...

You want to be married?

. Be marriage material..... this ain't it.

And you're wrong.. I did want to marry you.. I've talked about it.. fantasized about it.. dreamt about it... etc..etc.. sonforget all that nonsense. It YOU who cannot commit.. you told me that when we first started dating.

Carry on with the trash chris.. stop communicating with me.

You ate EXACTLY WHERE YOU WANT TO BE AND ARE HAPPIER THERE
↓



RCS message



TEXT MESSAGE FROM
NOVEMBER 23, 2024

FROM CHRIS, PETITIONER
TO DARCY, RESPONDENT
ACKNOWLEDGING NOT
MARRIED

11:16

42%

X 1



me.. I don't think so...

You want to be married?

Be marriage material..... this

Message Details

Type: End-to-End Encrypted
Rich Communication Service
message

Priority: Normal

From: (940) 655-4272

To: (940) 799-6633

Sent: 11/23/24 7:28 PM

Received: 11/23/24 7:28 PM

Close

You ate EXACTLY WHERE YOU
WANT TO BE AND ARE HAPPIER
THERE



RCS message



11:16

42%

1



And you're wrong.. I did want to
marry you.. I've talked about it..
fantasized about it.. dreamt
about it... etc..etc.. sonforget all

Message Details

Type: End-to-End Encrypted
Rich Communication Service
message

Priority: Normal

From: (940) 655-4272

To: (940) 799-6633

Sent: 11/23/24 7:28 PM

Received: 11/23/24 7:28 PM

Close

Done.

Blocked.



RCS message



EXHIBIT 6

SCREENSHOT FROM CHRIS'S FACEBOOK FROM DARCY ON SEPT 7, 2017

POSTING AS ENGAGED. NOT MARRIED. SCREENSHOT TAKEN NOVEMBER 1, 2024.

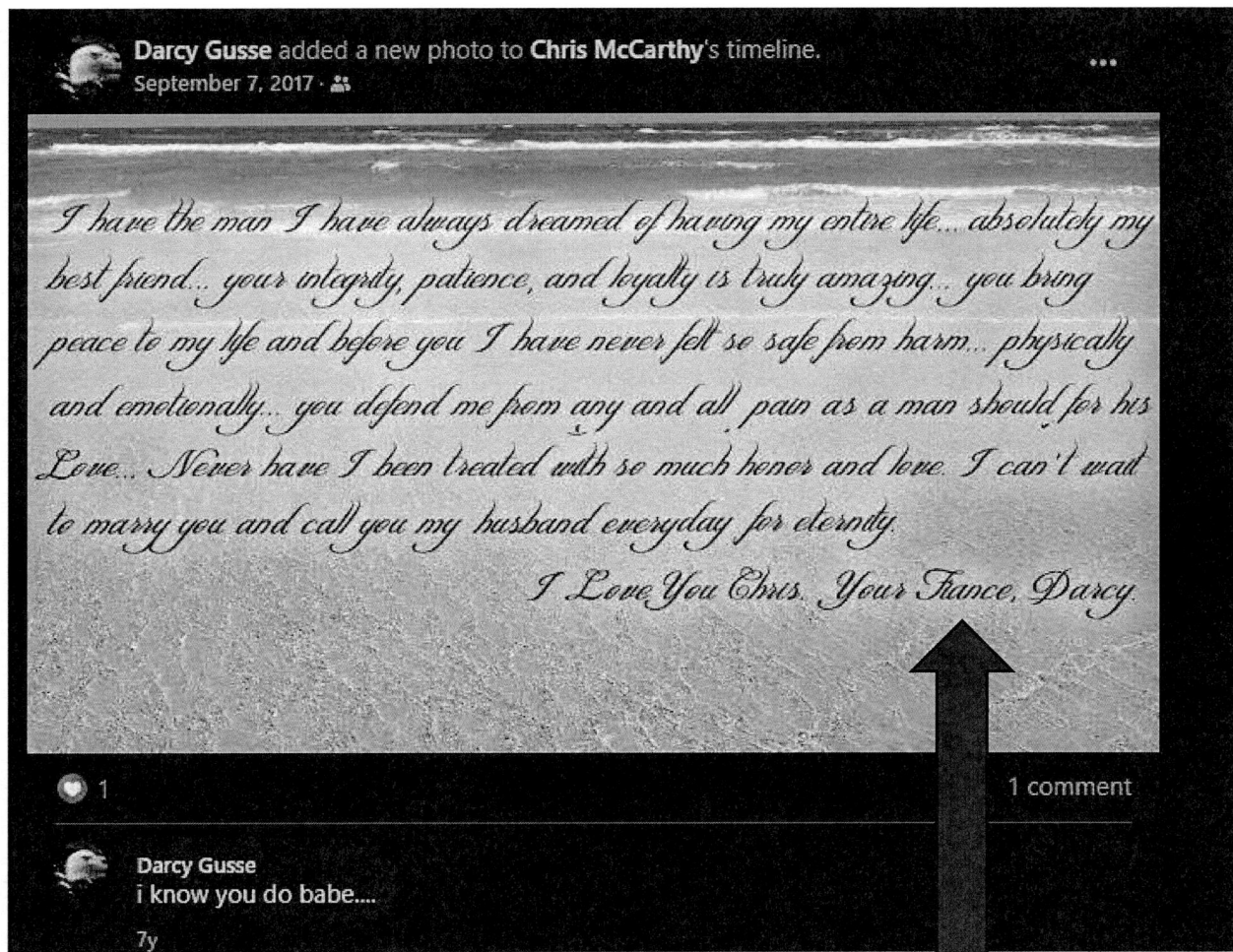


EXHIBIT 7

NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA

CAUSE NO.CV24-09-734

IN THE MATTER OF THE

IN THE COUNTY

MARRIAGE OF

COURT AT LAW #2

CHRIS MCCARTHY

WISE COUNTY, TEXAS

AND

DARCY GUSSE

AFFIDAVIT

Jennifer Flammang
311 Baxter Drive
Blue Grass, Iowa 52726

I, Jennifer Flammang, being duly sworn, declare this statement in support of Darcy Gusse, addressing the matter of Darcy Gusse and Chris McCarthy being Common law married.

1. I am an adult, over eighteen, residing at 311 Baxter Drive, Blue Grass, Iowa.
2. From 2018 until 2022, my husband, Todd Flammang, and I spent consecutive weeks with Chris McCarthy and Darcy Gusse during the winter, as my husband assisted Chris with concrete work.
3. I have known Chris McCarthy for approximately fifteen years and Darcy for about nine years.
4. In 2017, Chris lived with my husband and me for a year at 311 Baxter Drive, Blue Grass, Iowa, while he and Darcy were transitioning to Texas and selling his house in Bettendorf, Iowa.

It is crucial to note that Chris McCarthy and Darcy Gusse have not informally married at any time during the past nine years. While living with us in 2017, Chris purchased a gold engagement band for Darcy, but they never formalized their union, nor did Chris ever bring up the idea of marriage or a ceremony in any conversation with my husband or me.

Up until February of this year, Chris and Darcy were like family to us. However, Chris then began to make unfounded accusations, claiming that Darcy and my husband were having

an affair, and he subsequently blocked us on social media. His behavior indicated significant frustration with my husband, who was unable to assist him with work in Texas during the winter of 2023. My husband and I were occupied in Washington State with a property that we recently inherited from my father's passing. Chris's retaliatory rumors were unfounded and completely out of line, especially given the distance of 1,200 miles between us.

Over the past nine years, I have witnessed numerous arguments initiated by Chris against Darcy. On several occasions, Chris and my husband would return from work while in Texas, and Chris would raise his voice about homeowners dissatisfied with his work. He would often seek to cut corners on projects, insisting that Darcy handle the homeowner complaints because he could not maintain his composure. I have directly observed instances where Darcy advised Chris against certain actions, only for him to demean her in front of us for her disagreement. My husband and I frequently felt compelled to leave the room due to the uncomfortable atmosphere created by Chris.

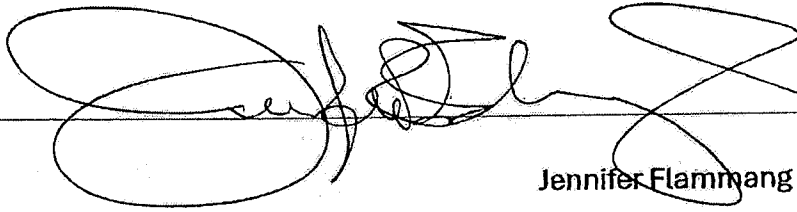
Chris is undeniably controlling and often interrupts those attempting to speak. I have experienced this firsthand; he routinely cuts others off during conversations. Over the years, I have observed that he frequently spends beyond his means. I recall a specific incident where Darcy stated their financial limits, to which Chris callously responded, "You can always make more money."

Another notable encounter occurred at Olive Garden in Davenport, Iowa. While waiting to pay, I informed Chris that he could use the kiosk at the table. His response was, "Fuck that. If they want a tip, they can take my card and do it." This type of attitude exemplifies his controlling nature.

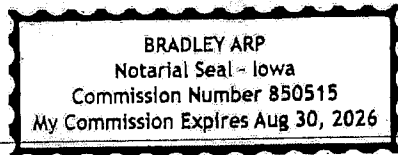
During his time living with us, Chris was involved in custody battles with his ex-partner, with whom he has children, and to whom he was never married. I was present during this tumultuous period and witnessed Chris's obsessive control. Following decisions he disagreed with, he even escalated matters to the Supreme Court. When it became necessary for Darcy to testify in his secondary custody case in which I could see she was reluctant in her behavior, I observed Chris dictating what Darcy needed to say, further reflecting his attempts to control her along with access to her finances and business decisions as he has done over the years. My husband and I were there during many conversations Chris would bring up in front of us.

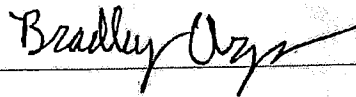
I have never seen Darcy have any violent tendencies toward Chris and I have never witnessed her threatening Chris as she has a very passive and caring nature. Darcy has always gone out of her way to avoid conflict with Chris.

I declare under penalty of perjury that the foregoing statement is true and correct.


Jennifer Flammang

Signed under oath before me on 11/15/2024





Notary Public, State of Iowa

CERTIFICATE OF SERVICE

I certify that on December 4, 2024, a true and correct copy of the foregoing document was served to each party of this suit pursuant to the Texas Rules of Civil Procedure. Fax to Andrew Lloyd Law Office.

/s/ Darcy Gusse
Darcy Gusse